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CONFIRMATION NO. 7659

<b>SERIAL NUMBER</b> 10/717,998	<b>FILING OR 371(c) DATE</b> 11/21/2003 <b>RULE</b>	<b>CLASS</b> 222	<b>GROUP ART UNIT</b> 3754	<b>ATTORNEY DOCKET NO.</b> 034017R006
<b>APPLICANTS</b> Matthew Hayduk, Glencove, NY;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/469,037 05/09/2003 and is a DIV of 10/623,716 07/22/2003 which is a DIV of 10/623,858 07/22/2003 which is a DIV of 10/623,720 07/22/2003 <i>yes</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 02/18/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i>		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 253	<b>TOTAL CLAIMS</b> 46
<b>INDEPENDENT CLAIMS</b> 6		<b>EXAMINER'S SIGNATURE</b> <i>[Signature]</i> <b>INITIALS</b> <i>[Initials]</i>		
<b>ADDRESS</b> 441				
<b>TITLE</b> Dispensing system with mixing module mount and method of using same				
<b>FILING FEE RECEIVED</b> 1413	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	